



WHAT IS INSPECT?

Indiana's Prescription Drug Monitoring Program

INSPECT is Indiana's prescription drug monitoring program which collects and tracks controlled substance dispensation data. This data is then made available to medical practitioners and law enforcement under certain conditions.

Each time a controlled substance is dispensed by a pharmacy to an Indiana resident, the pharmacy is required to report that data to INSPECT within seven days of the dispensation. Users of the INSPECT WebCenter can request Rx History Reports which show an individual's controlled substance history, including what products they obtained, the dates the prescription was written and filled, the prescriber and dispensing pharmacy.

INSPECT does not collect information on any drug that is not a controlled substance or any drugs that are administered in an inpatient or hospice setting. INSPECT also does not collect any information on a substance dispensed that is less than a 72-hour supply.

What is Doctor Shopping?

When a patient seeks to obtain controlled substances from multiple health care providers, often simultaneously, by either:

- A. Withholding material facts regarding their past and/or present controlled substance treatment.
- B. Engaging in deceptive practices meant to stymie attempts by their health care providers to better coordinate the provision of care.

Is Doctor Shopping Illegal?

Although **IC 16-42-19** does not use the term "doctor shopping" or "doctor shopping," it does clearly state that,

A person may not do any of the following:

1. Obtain or attempt to obtain a legend drug or procure or attempt to procure the administration of a legend drug by any of the following:
 - A. Fraud, deceit, misrepresentation, or subterfuge.
 - B. The concealment of a material fact.
2. Communicate information to a physician in an effort unlawfully to procure a legend drug or unlawfully to procure the administration of a legend drug. Such a communication is not considered a privileged communication.

What does INSPECT offer?

INSPECT is a completely free tool which has several program offerings to assist the medical community in providing patient care.

Rx History Reports

A patient's Rx History Report details all controlled substance activities over a given date range. Users registered with the INSPECT WebCenter can request Rx History Reports on their patients at anytime, from any internet connection. The conditions under which eligible users may obtain data from INSPECT are outlined in statute **IC 35-48-7-11.1**. To register with the WebCenter, please visit www.in.gov/inspect. A practitioner must hold a valid CSR license as well as an individual DEA number to be eligible for access to the INSPECT WebCenter. No information is provided without a WebCenter account. The contents of an Rx History Report should always be verified with the dispensing pharmacy if there are any questions.

Person Of Interest Notifications

INSPECT is required by statute to inform prescribers and dispensers of patients that meet a predetermined threshold of controlled substance dispensations. Patients who have exceeded that threshold become the subject of a Person of Interest (POI) alert which is then sent to every prescriber and dispenser of that patient. Recipients of a POI alert should request an Rx History Report on that patient via the WebCenter. POI alerts cover a 60-day period. POI alerts contain NO private health information, but do contain enough information for the recipient to perform a request for an Rx History Report.

Practitioner Self-Lookup

Registered users of the INSPECT WebCenter can perform a Practitioner Self-Lookup request if they are a prescriber. Similar to a credit report, this report will allow the prescriber access their full controlled substance prescribing history for a requested period of time. This can be a very helpful tool if a prescriber has been the victim of Rx pad theft or fraud.

Rx Watch Website

INSPECT launched a new companion site called Rx Watch which will provide information about pharmacy robberies and burglaries, license suspensions and revocations, and other pharmacy related news and announcements. Rx Watch also contains user-customizable analytic and GIS mapping tools as well as a video learning and training area. You can access Rx Watch by going to the INSPECT homepage at www.in.gov/inspect and clicking the Rx Watch logo.

For more information please visit www.in.gov/inspect or email: inspect@pla.in.gov.

Registering for the INSPECT WebCenter



1. Begin by going to the general information page at www.in.gov/inspect and clicking the INSPECT logo which says "Click Here to Login to the WebCenter". Click "Register" once you are at the WebCenter Login screen.
2. Complete the online application and be sure to provide your secure, private email address when registering. It is against INSPECT's security policy to email a user's confidential login information to an office-wide or third party email address. It is important to note that just because the online registration has been submitted does not mean your application is complete. To process and approve the application, an account re-authentication form must be submitted to the INSPECT office. Please do not submit multiple online registrations.
3. Complete the re-authentication form with your personal information. You will be prompted to print this form when you register online. A copy of that form is available at www.in.gov/inspect. Every field on the form is required. If any part is left blank, your registration will not be processed. If you are a law enforcement registrant, you must also provide a letter of intent with a supervisory signature with your account re-authentication form.
4. Have your re-authentication form notarized when you sign it. (Notaries are available at every bank.)
5. Mail the notarized form (and letter of intent if necessary) to the INSPECT program at: 402 W. Washington Street Room W072, Indianapolis IN 46204. If the notary seal is a stamp and visible over fax or email transmission you may fax it to 317-233-4236 or email it as an attachment to inspect@pla.in.gov.
6. Upon receipt of the account re-authentication form in the INSPECT office your registration will be processed and you will receive login information at the email address provided on your re-authentication form. You can login to the INSPECT WebCenter by going to our general information page at www.in.gov/inspect and clicking the INSPECT logo which says "Click Here to Login to the WebCenter". Processing usually takes 1-2 business days.

INSPECT Users & Non-users: Ensure your email and mailing addresses are current with INSPECT staff (inspect@pla.in.gov) and the Medical Licensing Board ((317) 234-2060), Board of Pharmacy ((317) 234-2067), or Nursing Board ((317) 234-2043).

Proper Use of INSPECT

As a reminder, practitioners may only obtain information from INSPECT to provide treatment or evaluate the need for treatment to a patient. This includes patients who have made appointments for an initial office visit or persons who have presented a prescription to a pharmacist. Practitioners may not request a report on office/pharmacy staff, prospective employees, or anyone else for whom there is no medical chart/record available on-site for review at the practitioner's office/pharmacy location. Law Enforcement users must have an open, active investigation with a case number in order to obtain information from INSPECT. INSPECT usage policies and guidelines are available for review at www.in.gov/inspect.

Eligibility

Eligibility for access to INSPECT is limited to practitioners that hold an individual DEA number along with a valid CSR (controlled substance registration) license, and sworn law enforcement officials. However, a user may choose to designate an "agent" within their office to access the WebCenter on behalf of the registered user. Any misuse of an INSPECT WebCenter account will fall solely on the registered practitioner so both parties should be well aware of usage policies. For questions on agents please email inspect@pla.in.gov.

Indiana Code 35-48-7-5.8 defines a practitioner as, "...a Physician, Dentist, Veterinarians, Podiatrists, Nurse Practitioners, Scientific Investigators, Pharmacists, or any other institution or individual licensed, registered, or otherwise permitted to distribute, dispense or conduct research with respect to, or administer a controlled substance in the course of professional practice or research in the United States.

Links

INSPECT Homepage: www.in.gov/inspect

INSPECT WebCenter Login page:
<https://extranet.pla.in.gov/PMPWebCenter/Login.aspx>

Health Information Privacy & HIPAA:
<http://www.hhs.gov/ocr/privacy/>

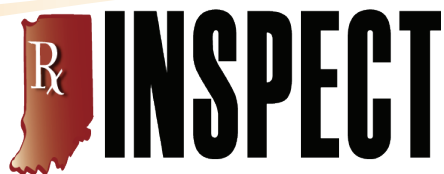
IC 35-48-7:

<http://www.in.gov/legislative/ic/code/title35/ar48/ch7.html>

Indiana State Medical Association: <http://www.ismanet.org/>

National Alliance for Model State Drug Laws:
<http://www.namsdl.org/home.htm>

Please email inspect@pla.in.gov with any questions.



HOW TO INTERPRET THE INSPECT RX REPORT

The Disclaimer

There is a disclaimer at the top of every INSPECT Rx report. Make sure to fully review the disclaimer before making patient treatment decisions on the basis of the report. Understand that mistakes do happen. The data contained in the report comes directly from dispensing pharmacies. Our matching system takes this into account and attempts to catch common variations on spellings. Always verify information on the report before drawing any conclusions about the patient with the dispensing pharmacy. The dispensing pharmacy is listed next to each prescription on the INSPECT Rx report, and the contact information can be found in the Pharmacy Key at the end of the report.

Patient Keys

Make sure to always review the Patient Key on the INSPECT Rx report. It is titled "Patients that match search criteria" and lists the name, date of birth and address of patients who match the information the user requested next to an ID number. Those ID numbers correspond to each record listed on the report, under the Pt ID column. Usually the listings under the Patient Key belong to one individual, but on occasion there are cases where data belonging to two individuals are mistakenly combined, creating a report that shows prescription records for both individuals. This can happen with twins, a father and son with the same name living at the same address, or with individuals who have the same name and date of birth (John James from Indianapolis, DOB 3/13/1981 and John James from Bloomington, DOB 3/13/1981.)

Reviewing the Patient Key will identify whether there is more than one individual listed on the report.

The INSPECT Rx Report is based on criteria entered by the user in the search request combined with the data submitted to us by the dispensing pharmacy.

Are there other Keys?

Yes, besides the Patient Key, which indicates the individual whose records appear on the report, there is a Prescriber Key that lists all the practitioners who have written the prescriptions on the report.

Similarly, there is a Pharmacy Key that indicates the dispensing facility corresponding to each prescription record.

Prescriber Key

In most cases, a prescriber key will be an abbreviation of a practitioner's name, (e.g. JO MIC for "Michael Johnson." In some cases, the abbreviation stands for a health network or hospital (e.g. CLA for "Clarian") which usually corresponds to instances in which a patient visited an emergency room or had a prescription written for them by a resident physician or physician's assistant not currently linked to an individual DEA number, and as such often writes prescriptions using the hospital's DEA number. In these situations, you can contact the dispensing pharmacy listed next to the relevant record to inquire about exactly who wrote the prescription. Be aware that some patients could have multiple prescribers listed on the report who share a common practice. If the addresses listed in the Prescriber Key are the same for more than one practitioner, they are likely practicing out of the same office location.

Pharmacy Key

The dispensing pharmacy for each prescription record is listed under the Pharm column on the INSPECT Rx report. The seven-digit number in the Pharm column corresponds to the pharmacy facility location shown in the Pharmacy Key at the end of the report. The pharmacy key displays contact information for each pharmacy referenced in the report.

If you see a DEA number in the Pharmacy Key, it means that the prescription was dispensed directly from a practitioner, not from a pharmacy. The DEA number will match that of a dispensing physician.

Combined information on the INSPECT Rx report

On occasion, an INSPECT Rx report will show records for more than one individual. This can happen as a result of the search criteria entered by the user, or it can happen due to the matching system used by the PMP WebCenter application. When a user enters search criteria, the system will match on the basis of (in order of priority) 1. first and last name 2. date of birth 3. address. Always review the Patient Key to determine whether the report is combining more than one individual's prescription history.

What do the headings above each column on the INSPECT Rx report mean?

Fill Date: The date the prescription was filled / dispensed by the pharmacy.

Product, Str, Form: Product is the name of the drug dispensed, Str is the strength of the product (usually in milligrams or milliliters) and Form indicates the physical make-up of the drug (tablet, capsule, injection.)

Qty: The quantity of the drug prescribed.

Days: The number of days the dispensed quantity was intended to cover.

HOW TO INTERPRET THE INSPECT RX REPORT

Pt ID: Stands for Patient ID, but it is not the social security or driver's license number of the patient. The Patient ID corresponds to a number in the Patient Key. The Patient Key identifies all the individual patient profiles associated with records on the report. It is important to always review the patient key to ensure that each prescription record has been correctly attributed to the patient subject of the report.

Prescriber: Corresponds to the practitioner who wrote the prescription. The abbreviation under the Prescriber column will match at least one of the practitioners listed in the Prescriber Key, titled "Prescribers for Prescriptions Listed".

Written: Corresponds to the date on which the prescription was written.

Rx #: Corresponds to the number the pharmacy uses internally to track that specific prescription.

N/R: Corresponds to whether the prescription is New, or whether it is a Refill from a previous prescription.

Pharm: Corresponds to the pharmacy which dispensed that prescription record. The seven-digit number will correspond to a pharmacy facility listed in the Pharmacy Key, titled "Pharmacies that dispensed prescriptions listed." The contact information for that facility will be listed in the Pharmacy Key.

Pay: Corresponds to the type of payment used for the prescription record.

Why do I get my INSPECT Rx report back right away sometimes, while other times it is emailed to me after a period of time?

Most patient information requests are auto-filled, meaning the report information is available to users in a matter of seconds. However, in some cases a user will get a message that states:

The request could not be processed because it returned too many records for the system to process automatically. Your request has been submitted to the INSPECT Administrator for completion. Your search will be processed within 24 hours, and you will be notified. Please do not resubmit this search. Thank you for your patience.
INSPECT Management Team.

If you receive this message, your request will be processed within 24 business hours. Once processed, a notification will be sent to the user's email address indicating that the report is available for viewing. You can view the request by logging into the PMP WebCenter, clicking the Request tab, and then clicking View. What the error message means is that the computer cannot correctly match records to the search criteria entered by the user, and that human intervention will be needed to fulfill the request. This can happen when conflicting information on the requested patient exists in the database, or when records match more than one individual. Supposed there is a case of a father and son with the same name living at the same address, or a set of twins who live at the same address and share the same date of birth. In such cases, the INSPECT Administrator matches the request, making every attempt to include only records for the patient on whom the user is requesting information.

Can I give my patient a copy of the INSPECT Rx report? Isn't it a medical record?

Per the disclaimer on top of each report, you should never fax, copy, email, mail or otherwise disseminate the INSPECT Rx report. It should not leave a practitioner's office.

The INSPECT Rx report is not a medical record; rather it is a direct reflection of medical records that exist on site at the dispensing pharmacies. The report should be viewed as a snapshot of the patient's controlled substance history at a given point in time, based on records available at the pharmacy level.

What if a patient says the INSPECT Rx report is wrong and the information is falsely attributed to them?

First, review the Patient Key to ensure there is not more than one individual on the report, and that the report has not combined information on the patient with that of another individual. Secondly, confirm any prescriptions of concern by contacting the dispensing pharmacy. The dispensing pharmacy will have the hard copy record of the original prescription, and should be able to answer questions regarding the prescription. The pharmacy can also verify the patient's information for you. For example, the pharmacy may have a different address on file for the patient and/or a different spelling of the patient's name.

If the patient contests the information on the report and believes that it is in error, INSPECT will provide that patient with a list of pharmacies who have dispensed to them. Upon receipt of that list, it is the responsibility of the patient to obtain their medical records from each dispensing pharmacy in order to determine that an error has been made at the pharmacy level. The dispensing pharmacy must then contact the INSPECT program and submit a Pharmacy Change Order Request to alter information previously submitted to the INSPECT database.

Before INSPECT will change records, both confirmation by the qualifying pharmacist that an error was made and a duly certified Pharmacy Change Request form is needed.

Can I share information on the INSPECT Rx report with other medical professionals?

You may share the information contained in the report (not the actual report) with any practitioner or provider listed on the report, who is mutually providing treatment to the patient in question. The passage of Senate Bill 356 allows practitioners to share information with Law Enforcement without fear of civil / criminal liability, and will take effect July 1, 2010.

Who can I contact if I have questions regarding the INSPECT Rx report?

Please email inspect@pla.in.gov with your inquiries for the fastest response time. You may also call 317-234-4458. General program information including instructional materials and documentation can be found at www.in.gov/inspect. You can also contact your regional pharmacy compliance officer.



Indiana Prescription Monitoring System

402 W Washington St, Room W072; Indianapolis, IN 4

Phone: (317) 234-4458 Email: inspect@pla.in.gov Fax: (317) 233-4236

Inspect RX Report

Disclaimer: a) Limited usage of INSPECT report information. This report is only intended to provide INSPECT users with an overview of a patient's prescription activity over a specific period of time. The State of Indiana does not warrant this information to be fully complete or accurate. For more information about the prescriptions attributed to the subject of this report, please contact the dispensing pharmacies listed on the final page of the report. All identified inaccuracies/errors should be reported to INSPECT@pla.in.gov or to the INSPECT help desk at 317-234-4458.

(b) Sources of prescriptive data in report. The prescriptive records noted in the INSPECT report should reflect actual patient records available at each of the dispensing pharmacies listed at the bottom of the report. The records in the report cannot be altered or modified by members of the INSPECT staff without the express written consent of the dispensing pharmacy. INSPECT users should never take steps to modify the results of an INSPECT report, even if those results are inaccurate.

(c) Evaluating search results. The results of an INSPECT search reflect a combination of both the INSPECT software's interpretation of the search criteria entered by the user and the prescription data submitted to INSPECT by each of the dispensing pharmacies listed at the bottom of the report. Users should always check patient keys listed at the bottom of the report to ensure the report reflects the prescriptive history of the correct patient. And in the case of potential inaccuracies/errors, users should call the appropriate dispensing pharmacy to verify the prescription in question. All pharmacy contact information is listed on the final page of the report.

(d) Patient prescriptive records currently unavailable. Prescriptions dispensed on an outpatient basis from doctor's offices and some clinics, as well as from exempt facilities such as prisons, methadone clinics, and the Veteran Administration hospitals, may not be present in the INSPECT report. Instances in which a dispensing pharmacy fails to report every seven (7) days in accordance with Indiana statute may adversely affect the accuracy and/or timeliness of the information contained in the INSPECT report.

(e) Multiple prescriptions attributed to patient on single day. In some cases, two prescriptions attributed to a patient for a single day may be the result of an unresolved Medicaid and/or health insurance claim at the pharmacy level. Be sure to contact the dispensing pharmacies to validate all prescription information presented in the report.

(f) Timeliness of the report. While Indiana law requires that all pharmacies submit data to INSPECT within seven (7) days from the date on which a drug is dispensed to a patient, there may be a lag of two (2) weeks or more before prescription data is available for review on INSPECT.

(g) Usage by certified agents. Registered INSPECT users may certify an agent to access INSPECT on their behalf. The healthcare provider assumes sole responsibility for all activities related to the usage of their individual INSPECT account.

(h) Safeguarding patient confidentiality. All users (healthcare providers, and/or their agents) should run INSPECT reports only on those patients to whom they are providing treatment or identifying the need for treatment. It is a violation of HIPAA and a patient's right to privacy to discuss the contents of this report with individuals who are not directly involved in providing treatment to the subject of the INSPECT report.

(i) Approved manner of sharing and storing report. While the INSPECT report should not be considered part of the patient's per se medical record, the information contained in the INSPECT report is privileged medical treatment information that should not be shared or discussed with anyone not in some way involved in the provision of medical treatment to subject of the report. If the INSPECT Patient Rx History Report is to be stored alongside other patient medical records, it must be clearly marked "Do Not Copy," and it should never be included when sending a patient medical records to another health provider, as the contents of the report are subject to change. Users are permitted to contact other health providers to discuss the contents of an INSPECT report as it relates to the care of a mutual patient. If another health provider wishes to obtain their own hard copy of a patient's INSPECT report, they should be advised to establish their own user account with INSPECT and submit a separate request for the report. The report, or the contents of the report, should not be faxed, mailed, emailed or otherwise disseminated.

(j) Patient access to report and procedures for resolving errant data. The INSPECT report provides a comprehensive listing of outpatient dispensed controlled substance prescriptions attributed to a single patient over a specific date range. The information contained in each INSPECT report should, by law, mirror the records stored on-site at each dispensing pharmacy. Patients are eligible to obtain all of their records stored on-site at dispensing pharmacies; however, patients are not eligible users of INSPECT services, and they should not be provided copies of the INSPECT report. In the event of an error or reporting discrepancy, the INSPECT program will correct the record if and only if the dispensing pharmacy formally acknowledges the existence of such a problem. Health providers are encouraged to work on the patient's behalf to resolve problems at the pharmacy level. On a case by case basis, INSPECT will provide concerned patients with a listing of all dispensing pharmacies corresponding to each prescription record attributed to the patient over a specified period of time. The dispensing pharmacy listing provided by INSPECT should be sufficient to allow the patient to remedy any errant records on file at the dispensing pharmacy. After appropriate changes are made to records at the pharmacy level, and after the pharmacy duly notifies INSPECT of these changes, the INSPECT program staff will take immediate steps to update INSPECT records



Indiana Prescription Monitoring System
402 W Washington St, Room W072; Indianapolis, IN 4

Phone: (317) 234-4458 Email:inspect@pla.in.gov Fax:(317) 233-4236

Inspect RX Report

dummy,patient

Date: 12-09-2010

Search Criteria: Last Name: dummy First Name: patient Date Of Birth: 1/1/2000 Gender: 6

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Patients that match search criteria

Pt ID	Name	DOB	Address
1904	PATIENT DUMMY	01/01/2000	3109 W. SYCAMORE KOKOMO IN 46901
1882	PATIENT DUMMY	01/01/2000	3109 W Sycamore St Kokomo IN 469014181
9945	PATIENT DUMMY	01/01/1950	123 HAPPY STREET SC 29306
7088	PATIENT DUMMY	06/28/1900	4681 W COWDEN RD IN 47429
4601	PATIENT DUMMY	04/18/1958	2530 N WEBSTER ST IN 46901
4604	PATIENT DUMMY	04/15/1945	250 MC DOWELL LN IN 47462
4605	PATIENT DUMMY	06/28/1953	4681 W COWDEN RD IN 47429

Prescriptions

Fill Date	Product, Str, Form	Qty	Days	Pt ID	Prescriber	Written	Rx #	N/R	Pharm	Pay
11/15/2010	HYDROCODONE BITARTRATE AND ACETAMINOPHEN TABLETS, 500 MG;5 MG, TABLET	60	8	9945	BR D	11/12/2010	4006062	N	1520318	U
10/12/2010	EMBEDA CAPSULES EXTENDED RELEASE, 30 MG;1.2 MG, CAPSULE, EXTENDED RELEASE	84	28	1882	KL J	10/12/2010	2013618	N	1517979	U
08/10/2010	HYDROCODONE BITARTRATE AND ACETAMINOPHEN TABLETS, 500 MG;7.5 MG, TABLET	30	5	1904	DI M	08/10/2010	4059071	N	1517979	U
07/22/2010	HYDROCODONE BITARTRATE AND ACETAMINOPHEN TABLETS, 500 MG;10 MG, TABLET	20	4	1904	RI K	07/22/2010	4017439	N	1536373	U
07/22/2010	HYDROCODONE BITARTRATE AND ACETAMINOPHEN TABLETS, 500 MG;10 MG, TABLET	20	4	1904	RI K	07/22/2010	4017439	R	1536373	U
07/22/2010	HYDROCODONE BITARTRATE AND ACETAMINOPHEN TABLETS, 500 MG;10 MG, TABLET	60	10	1904	RI K	07/22/2010	4017439	R	1536373	U
07/22/2010	HYDROCODONE BITARTRATE AND ACETAMINOPHEN TABLETS, 650 MG;10 MG, TABLET	150	30	1904	RA B	07/22/2010	4017445	N	1536373	U
07/17/2010	TUSSIONEX SUSPENSION EXTENDED RELEASE, NS;NS, SUSPENSION, EXTENDED RELEASE	120	10	9945	TH F	07/17/2010	4004975	N	1532161	U

DISCLAIMER: The State of Indiana does not warrant the above information to be complete or accurate. This report, and the information contained in this report, must be used in accordance with IC 35-48-7, the INSPECT Health Practitioner Usage guidelines, and all federal laws pertaining to confidential patient health information. To ensure protection of patient privacy, this report must never be mailed, emailed, faxed or otherwise distributed. If this report is printed or stored on-site, it must be marked "Do Not Cop." Misuse of INSPECT data is a criminal offense and could result in action adverse to an accountholder's professional license

Unsolicited Reporting & Person of Interest Alerts



What is an Unsolicited Report?

Traditionally, registered INSPECT users sign-in to the online application, the PMP WebCenter, to request or solicit information on a patient and a report is returned displaying the controlled substance history of that patient. Effective July 1, 2010 the scope of INSPECT services has expanded to include a new “unsolicited report” offering in the form of Person of Interest Alerts. The Person of Interest Alerts will provide both registered INSPECT users and non-users with information regarding patient activities.

Definition of a Person of Interest

The Person of Interest Alert is designed to notify both registered INSPECT users and non-users alike of possible patient misuse or diversion of controlled substances. Receipt of such an alert means that-based on an objective review of available INSPECT records-a patient under your care (and potentially under the care of several other practitioners) has exceeded the patient dispensing guidelines established in August 2010 by the Indiana Board of Pharmacy.

Person of Interest Alerts should not be construed as evidence that a crime has taken place. All information contained in the INSPECT report comes from data reported to INSPECT by licensed dispensing pharmacies, and should be fully validated to ensure that the data is accurate and complete. While there is a chance that the patient’s INSPECT report may not be fully complete or accurate, or that it may be flawed in other ways, in the interest of helping to limit the illicit diversion of prescription drugs statewide, and in the interest of protecting the safety and well-being of patients, we are statutorily required to inform you of our findings ([IC 35-48-7](#)).

How does it work & what to do with an Alert?

To start, login to INSPECT and run a patient report on the subject of the Person of Interest Alert you received. A practitioner will not be able to access protected prescription information on the subject of a Person of Interest Alert until they login to their INSPECT account, via the online application, the WebCenter (the alert itself only contains the name of the individual who exceeded the pre-established thresholds). If you do not have an INSPECT account but wish to obtain one, follow the directions in the section titled “Registering for INSPECT & Links” below.

Under Indiana law practitioners are not required to use INSPECT, but will need to have an account in order to research any Person of Interest Alert received and review the prescriptions obtained by the subject of that alert. Practitioners who do use INSPECT are immune from civil liability for an injury, death, or loss to a person solely due to a practitioner seeking or not seeking information from the INSPECT program, so long as there is no gross negligence or intentional misconduct. However, immunity does not apply if the practitioner receives information directly from the INSPECT program and then negligently misuses the information (i.e., by acting in a manner that violates sharing rules and policies of the INSPECT program or their respective employers). Possession and proper use of an INSPECT report is permissible and not a violation of HIPAA.

With respect to the next steps, the Indiana Board of Pharmacy in consultation with the other health profession licensing boards and associations advises that a practitioner should first run an INSPECT report on the subject of a Person of Interest Alert to verify the authenticity and validity of the data. Any questions on the report should be answered by a review of your own records and by consulting with the dispensing pharmacy who filled the prescription in question to verify accuracy and authenticity.

Practitioners should ensure that in fact they wrote and authorized the prescriptions for that patient that are attributed to their name. The Board of Pharmacy then advises that the practitioner perform a clinical evaluation of the patient to determine the next steps before taking or determining final action. The Board recognizes and advises that each case will be different and that no one solution will be right for every patient. The Board advises that practitioners should exercise their best professional judgment and be mindful that they have a duty to protect public health and safety, as well as the health of their individual patient. To that end, the following action steps are permissible, and may provide an option(s) to assist practitioners in deciding how best to act:

- Practitioners are permitted by state and federal law to discuss the reports with other treating and prescribing providers, including pharmacists, to develop appropriate action plans (or to verify treatment of the patient in question).
- Some practitioners may want to continue treating the patient, if they think it is legal and in their professional judgment in the best interest of the patient.
- Some practitioners may want to counsel the patient or enter into an agreement with the patient for treatment or referral to a facility.
- Practitioners could determine that the best course is to continue treatment but require them to enter into a contract or monitoring agreement.
- Depending on the nature and severity of the drug problem, it may be appropriate for the practitioner to consider referring the case to local, state, or federal law enforcement authorities.

Unsolicited Reporting & Person of Interest Alerts



These are just a few of the many different options available that practitioners can pursue to deal with a patient who may be abusing or misusing controlled substances. The Board's goal is to provide this tool to help practitioners combat doctor shopping, diversion, and the misuse of prescriptions drugs. The reports and the established thresholds are designed so as not to interfere with legitimate use and patient care.

Person of Interest Alerts do not include any private health information.

FAQs

- 1. Will the alerts be issued all at once monthly, or will they be staggered in some way? In other words, could physicians receive them any time, or will they likely only receive them all at once at one particular point every month?**
We are planning to send out unsolicited reports every sixty (60) days, with the first tentative mail out date will be October 11, 2010, covering the period of 8/1/2010 – 9/30/2010.
- 2. The email alert says, “We are statutorily required to inform you of our findings.” Can you tell me what statute requires that?**
This statement refers to IC 35-48-7-11.5.
- 3. The website says it generally takes 2-3 business days to get registered for INSPECT. Is that accurate?**
Yes. This used to be closer to one (1) business day, except on weekends. However, INSPECT is now required to follow specific authentication/registration protocols required of states in receipt of Federal NASPER grant funds. These protocols involve the collection of signed, notarized documentation from all registrants—hence, the greater lag time between when the registrant completes the web application and when they actually receive their login credentials. You can find out more information on account re-authentication here: <http://www.in.gov/pla/2333.htm>
- 4. The email alert says, the INSPECT report “should be fully validated to ensure that the data is accurate and complete.” How would a physician do that?**
Validating prescriptive records refers to the practice of contacting dispensers to ensure that there are no major errors/discrepancies on the INSPECT Report. As we note in the INSPECT report disclaimer (and in many other reference documents), the information contained in the report comes directly from the dispensing pharmacy and is subject to error (note: we estimate that our error rate is currently around 1%; however, 1% of 12 million is still 120,000). We also have educational materials about “interpreting the INSPECT report” that cover best practices as it relates to reviewing INSPECT report information. This is available at www.in.gov/inspect.
- 5. Do the Person of Interest Alerts go only to prescribers? Does law enforcement receive any form of the unsolicited reports?**
The Person of Interest Alerts currently go only to prescribers and the pharmacist-in-charge at the pharmacies that are shown to have dispensed to the patient in question. We do not currently provide any unsolicited reports to law enforcement.

Health Information Privacy & HIPAA: <http://www.hhs.gov/ocr/privacy/>

Please email inspect@pla.in.gov with any questions.



Person of Interest Alert



TO ADVANCE THE HEALTH AND SAFETY OF HOOSIERS THROUGH THE COLLECTION AND SECURE MAINTENANCE OF CONTROLLED
SUBSTANCE PRESCRIPTION DATA

DEAR HEALTHCARE PRACTITIONER,

You are in receipt of an INSPECT Person of Interest Alert. The INSPECT Program has identified “**DUMMY**” as having exceeded specific patient dispensing guidelines set forth by the Indiana Board of Pharmacy. Please review the attached letter sent with this email. To review a full patient report corresponding to this patient, please submit a request through the INSPECT PMP WebCenter. If you are not currently a registered INSPECT accountholder, you may register for account access by visiting www.IN.gov/inspect.

WHAT IS INSPECT?

Since 2007 the Indiana Scheduled Prescription Electronic Collection and Tracking Program, better known as INSPECT, has sought to provide Indiana health care providers with timely controlled substance treatment information for those patients to whom they are providing treatment. All individuals with the authority to prescribe or dispense controlled substances are eligible to utilize INSPECT’s web-based software, known as the PMP WebCenter, to access patient report information 24/7.

WHAT IS A PERSON OF INTEREST ALERT?

Effective July 1, 2010 the scope of INSPECT services has expanded to include a new “unsolicited report” offering in the form of Person of Interest Alerts.

The Person of Interest Alert is designed to notify both registered INSPECT users and non -users alike of possible patient misuse or diversion of controlled substances. Receipt of such an alert means that -based on an objective review of available INSPECT records-a patient under your care (and potentially under the care of several other practitioners) has exceeded the patient dispensing guidelines established in August 2010 by the Indiana Board of Pharmacy.

Person of Interest Alerts should not be construed as evidence that a crime has taken place. All information contained in the INSPECT report comes from data reported to INSPECT by licensed dispensing pharmacies, and should be fully-validated to ensure that the data is accurate and complete. And so, while there is a chance that the patient’s INSPECT report may not be fully complete or accurate, or that it may be flawed in other ways, in the interest of helping to limit the illicit diversion of prescription drugs statewide, and in the interest of protecting the safety and well-being of patients, we are statutorily required to inform you of our findings.

WHAT TO DO NEXT?

If you would like to review the patient’s full prescriptive history, you must first establish an INSPECT account. For more information, please visit www.IN.gov/inspect.

Once you have fully reviewed the patient’s prescriptive history available through INSPECT, how you proceed in handling the matter is entirely up to you, and the optimal response may vary depending circumstances /context of the situation. For additional guidance or best practices, it may be helpful for you to review your organization’s policy/procedures, contact the appropriate licensing board for your profession, or seek counsel from your statewide membership association.

In weighing your options, however, please aware that the also-recently-passed IC-35-48-7-11.1 (h) states that, “A practitioner who in good faith discloses information based on a report from the INSPECT program to a law enforcement agency is immune from criminal or civil liability.” Hence, if you have reason to believe that a patient’s INSPECT report suggests criminal behavior on the part of the patient, you have the option of sharing your findings with a law enforcement officer.

Sincerely,
INSPECT Administrators

Various Aliases and Addresses Used by Subject:

DUMMY A 05/05/1927 715 S. BALDWIN
DUMMY DUMMY 05/14/1945 1405 N PARK AVE
DUMMY DUMMY 13 W JACKSON ST
DUMMY FILE 01/01/1901 800 Fulton St
DUMMY IMA 02/01/1901 123 MAIN STREET

Practitioners Utilizing INSPECT



PURPOSE

To ensure the protection of patient confidentiality when using the INSPECT System

SCOPE

This policy applies to all health care practitioners that are registered INSPECT accountholders.

STATEMENT OF POLICY

Each healthcare practitioner granted access to INSPECT holds a position of trust and must preserve the security and confidentiality of the INSPECT data he/she uses. INSPECT practitioners must meet specific eligibility requirements and must abide by all applicable Federal and State guidelines including, but not limited to, IC-35-48-7 and The Health Insurance Portability and Accountability Act of 1996 (HIPAA). Misuse of INSPECT data constitutes a criminal offense and may result in the suspension/revocation of a registered accountholders access privileges, or, in some cases, action against the offending accountholder's professional license and / or agent. Registered accountholders wishing to reinstate their INSPECT account access privileges must formally petition the Controlled Substances Advisory Committee.

REFERENCE

IC-35-48-7-11.1

USAGE GUIDELINES

1. Establishing an INSPECT Account: Only health practitioners who are licensed to prescribe or dispense controlled substances in the United States may establish an INSPECT account. Once an account is approved for the health practitioner they become registered accountholders, and each registered accountholder is eligible to request an INSPECT Patient Prescription (Rx) History Report via the INSPECT PMP WebCenter.
2. Certifying an Agent: Each registered accountholder may certify whomever they choose to serve as their agent for purposes of submitting requests to INSPECT; however, any misuse or illicit activity found to be occurring with an account is the primary responsibility of the registered accountholder. The agent of the registered accountholder may also be subject to civil or criminal liability if they are responsible for any misuse or illicit activities occurring while using the system.
3. Contents of Report: An INSPECT Patient Rx History Report provides an overview of a patient's prescription activity over a certain period of time. The information contained in the report is submitted to INSPECT by the dispensing pharmacy within seven (7) days from the date on which the drug was dispensed to the patient. There is often a lag of up to two (2) weeks before the prescription data is available for review on INSPECT. Prescriptions dispensed on an outpatient basis at hospital pharmacies or doctors' offices are only legally required to be reported after January 1st, 2009 for prescriptions of more than a 72-hour supply, and may not be present on any INSPECT Rx History Reports until after that date.
3. Requesting Report: Each registered accountholder or their agent may only request reports on patients for whom they are providing treatment or evaluating the need for treatment. This includes patients who have made appointments for an initial office visit or persons who have presented a prescription to a pharmacist. Health Practitioners may not request a report on office/pharmacy staff, prospective employees, or anyone else for whom there is no medical chart/record available on-site for review at the practitioner's office/pharmacy location.
4. Limited Use of Report: The INSPECT Patient Rx History Report must be used only for purposes of making medical treatment decisions. Users should always take steps to verify that the information contained in the report is accurate. The report should be one factor in a comprehensive assessment of a patient.
5. Sharing Report: The information contained in the INSPECT Patient Rx History Report is privileged medical treatment information and must not be discussed with anyone who is not involved in the direct provision of medical treatment for the patient. Each registered accountholder may contact the other health providers on the INSPECT Patient Rx History Report to discuss the care of a mutual patient. If another provider wishes to have a copy of the INSPECT Patient Rx History Report, they should establish an account and submit a request for their own copy of the report. The INSPECT Patient Rx History Report, or the contents of the report, should never be faxed, mailed, emailed or otherwise disseminated. Practitioners must also not provide a copy of the INSPECT report to the patient. On matters related to the sharing of an INSPECT Patient Rx History Report with law enforcement, please consult with the appropriate professional association or attorney for additional guidance.
6. Storing Report: If the INSPECT Patient Rx History Report is stored along with a patient's other medical records, it must be clearly marked "Do Not Copy." It should never be included when sending a patient's medical records to another health provider.
7. Role of INSPECT Staff: Each registered accountholder or non-accountholder will not receive confidential prescription information from the INSPECT staff over the phone. Each registered accountholder or non-accountholder should not expect the INSPECT Staff to serve in a liaison role between themselves and law enforcement.

Please email inspect@pla.in.gov with any questions.

INSPECT USER GUIDE

www.in.gov/inspect

Email: inspect@pla.in.gov



LOGIN PAGE: [Prescription Monitoring Program Login](http://www.in.gov/inspect) or you may visit www.in.gov/inspect and click the INSPECT logo to be taken to the login page.

Have your username (ex: jjones) and password ready

1. Login to the WebCenter with your username and password.

If you do not know your password, you may reset it by clicking [Forgot Password?](#) You will be asked to provide your username and the answers to your security questions, which are case-sensitive. If you do not know your username, please email: inspect@pla.in.gov.

2. Click the **Requests** tab in the upper left corner, then click **New Request** to submit a request for a new report. You can also view previous requests made by this account by clicking **View Request**.

INDIANA PRESCRIPTION MONITORING PROGRAM Welcome, Practitioner Test [MY ACCOUNT](#) [LOGOUT](#)

Request

Home > Request > New Request

View Request
New Request
Unsolicited - Received
Unsolicited - Send
Practitioner Self-Lookup

Latest News

Length of Requests

The length of a request is restricted to 365 days. If older information is needed, the user can make multiple requests for that individual in year increments. Example:
1/1/2009 - 12/31/2009,
1/1/2010 - 12/31/2010.

Request Patient

Patient Details

Last Name: Testpatient First Name: betty Middle Name:
Birth Date: 01/01/1970 Gender:
Contact Details
Street: City: State: IN Zip:
Family Members [Add](#)
Prescription Range
☐ Set default to last 12 months date range Begin Date: 01/01/2009 End Date: 12/31/2009
Options
Format: PDF
Request To State(s)
☒ OHIO ☐ VIRGINIA
The interstate request may take longer for response.
☒ I certify that the information I have entered above is accurate.
Testpatient betty [Create](#)
01/01/1970

3. Enter the patient information you wish to search for. Best results are obtained by using the first name, last name and date of birth.

The default time period to search is 1 year but you may change the date range by *unchecking* the box and entering new information. The time period for requests is limited to 365 days, but you may make multiple requests for different years if you wish. (Ex. 1/1/2010-12/31/2010, 6/1/2009-6/1/2010)

4. In the **Request to State(s)** region, you may check the box next to **OHIO** to send your request to the Ohio system as well as to INSPECT.

(In the contact details you can leave the state selection at the default of IN or change it to OH or blank – correct results will be returned with any option chosen as long as the OH box is checked in the **Requests to State(s)** area)

5. You must check the authorization box at the bottom of the screen to continue.

6. Click **Create** when you have completed your request. It may take a few moments to process before you see the new page.

Request Patient

User Name	Response	Sent On	Attachment	Delete
Practitioner Test	Your request has been processed automatically	9/9/2011 11:42:00 AM	Patient Rx History Report.PDF	Delete

Current Response

Practitioner Test on Fri 9/9/2011 11:42 AM Attachment: Patient Rx History Report.PDF
Your request has been processed automatically

[Browse...](#) [Display All Results](#)

Patient Details

Last Name: dummy First Name: patient Middle Name:
Birth Date: 01/01/2001 Gender:
Contact Details

7. Click the orange button that says **"Display All Results"**. This will return complete results from all states queried in one report. The report will start on page 2 of the .PDF document.

INDIANA PRESCRIPTION MONITORING PROGRAM

402 W. Washington Street, Rm. W072 • Indianapolis, IN 46204

OFC: (317) 234-4458 • FAX (317) 233-4236 • www.in.gov/inspect**PRACTITIONER REGISTRATION / RE-AUTHENTICATION FORM**☐ **New User**☐ **Update User Info**

Each user granted access to INSPECT holds a position of trust and must preserve the security and confidentiality of the INSPECT data he/she uses. INSPECT approved users must meet specific eligibility requirements and must abide by all applicable federal and State guidelines including, but limited to, IC-35-48-7 and The Health Insurance Portability and Accountability Act of 1996 (HIPPA). Misuse of INSPECT data constitutes a criminal offense and may result in the suspension/revocation of a registered account holders access privileges, or, in some cases, action against the offending account holder's professional license and/or agent. Registered account holders wishing to reinstate their INSPECT account access privilege must formally petition the Controlled Substances Advisory Committee (CSAC).

PLEASE PRINT

Requestor Name _____

State Board License (Professional License Number) _____

Drivers License Number _____

DEA # (Practitioner) _____

*Pharmacist can leave this blank **REQUIRED to all other Professions.

Please select your occupation:

- | | | |
|--|--|--|
| <input type="checkbox"/> Doctor of Medicine | <input type="checkbox"/> Osteopathic Physician | <input type="checkbox"/> Doctor of Dental Medicine/Surgery |
| <input type="checkbox"/> Podiatrist | <input type="checkbox"/> Physician Assistant | <input type="checkbox"/> Certified Nurse-Midwife |
| <input type="checkbox"/> Clinical Nurse Specialist | <input type="checkbox"/> Veterinarian | <input type="checkbox"/> Registered Pharmacist |
| | | <input type="checkbox"/> Nurse Practitioner |
| | | <input type="checkbox"/> _____ |

Primary Residence Address _____

City: _____ State: _____ Zip: _____

Telephone Number (including area code) _____

Cell/Other Number (including area code) _____

Fax Number (including area code) _____

E-mail Address (Provide a secure personal email address for the registering individual) **REQUIRED _____

Residence Address Listed on Driver's License (if different from above) _____

City: _____ State: _____ Zip: _____

.....
I certify that the information I request will be kept confidential, and I understand that I will be held liable for any breach of that confidentiality.

Signature of Affiant _____

Date _____

STATE of _____

COUNTY OF _____

AFFIDAVIT

Before me, the undersigned authority in and for the State of _____, personally appeared.

Who is known to me and who after being first duly sworn deposes and says that the above and foregoing document is true and correct to the best of his/her knowledge, information, and belief formed after reasonable inquiry.

Subscribed and sworn to before me this _____ day of _____, 20____.

Notary Public Seal

Notary Public Signature _____

FOR DEPARTMENT USE ONLY

Date Received	<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved	Staff Signature	Date of Action
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